

ROUTING AND TRANSMITTAL SLIP

TO: (Name, office symbol, room number, building, Agency/Post)

Initials Date

1. 0 DT-SC

2.

3.

4.

5.

Action  
Approval  
As Requested  
Circulate  
Comment  
Coordination

File  
For Clearance  
For Correction  
☒ For Your Information  
Investigate  
Justify

Note and Return  
Per Conversation  
Prepare Reply  
See Me  
Signature

REMARKS

Attached are a set of Waivers which have been approved for the factory AAP requirements.

. 330 / 0262/92  
. 330 / 0252/92

Original Waivers have been given to RSG-4 for the official Contract file

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

FROM: (Name, org. symbol, Agency/Post)

Room No.—Bldg.  
72-800

Phone No.  
X 2740

SG1J

SG1J